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<b>SERIAL NUMBER</b> 10/798,081	<b>FILING OR 371(c) DATE</b> 03/11/2004 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 1941.012US1
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/453,886 03/12/2003 *JP*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
05/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Joan</i> <i>JP</i> Examiner's Signature Initials				

## ADDRESS

21186

## TITLE

Animal model simulating neurologic disease

<b>FILING FEE RECEIVED</b> 583	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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